



FORM PTO-1083

81855.0008

Patent Application No. 09/827,507

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Tri Minh Nguyen

Serial No: 09/827,507

Filed: April 6, 2001

For: APPARATUS AND METHOD FOR MONITORING  
MANUFACTURING STATUS

Art Unit: 2125

Examiner: Ryan A. Jarrett

I hereby certify that this correspondence  
is being transmitted via facsimile to  
(703) 746-7239,  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450 on  
July 21, 2003  
Date of Deposit  
Diane Zynn  
Name  
*Diane Zynn*  
Signature 07/21/03  
Date

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.  
☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.  
☒ No additional fee is required.

The fee has been calculated as shown below:

|   | (Col. 1)<br>CLAIMS REMAINING<br>AFTER AMENDMENT |   | (Col. 2)<br>HIGHEST NUMBER<br>PREVIOUSLY PAID FOR | (Col. 3)<br>PRESENT<br>EXTRA* | LG/SM<br>\$ ENTITY FEE                               | ADD'L<br>FEE DUE |
|---|---|---|---|-------------------------------|--|------------------|
| TOTAL CLAIMS FEE                                | 23  | - | 25  | **                            | LG=\$18<br>SM=\$9                                    | \$0              |
| INDEPENDENT<br>CLAIMS FEE                       | 2   | - | 3   | ***                           | LG=\$84<br>SM=\$42                                   | \$0              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS |   |   |   |                               | LARGE ENTITY FEE = \$280<br>SMALL ENTITY FEE = \$140 | \$0              |
| Independent Claims: 1 and 22                    |   |   |   |                               | TOTAL  | \$0              |

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the fee of \$ for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.  
☒ Please charge the fee of \$930 for the three-month extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.  
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.  
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims  
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

By:

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Lawrence J. McClure  
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Date: July 21, 2003

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